

APPENDIX A3 STAFF RELATIONSHIP GUIDELINES

GENERAL PRINCIPLES

- A. Substance Abuse Prevention and Treatment Agency (SAPTA) staff and administration hold their positions as a public trust. Employees fulfill that trust by adhering to general principles of ethical conduct. They fulfill that trust by striving to:
 - 1. Put the interests of the citizens of Nevada first in the completion of assigned duties.
 - 2. Avoid any activity that would create the appearance of a legal or ethical breach.
 - 3. Act impartially and not give preferential treatment to any organization or individual.
 - 4. Not use public employment for private gain.
- B. The following guidelines are supplemental to Nevada Administrative Code (NAC): Nevada Revised Statutes (NRS), the State Administrative Manual, and the Department of Health and Human Services Prohibitions and Penalties. A copy of the Prohibitions and Penalties is attached as well as selected sections of NAC and NRS.
- C. The purpose of this document is to highlight facets of staff relationships with alcohol and drug abuse service providers, clients, volunteers, boards of directors, the public, co-workers within SAPTA, and co-workers within the Department of Health and Human Services. These guidelines will be incorporated into staff work performance standards.

GENERAL BEHAVIOR: RELATIONSHIPS WITH THE FIELD AND OTHER DIVISION PERSONNEL

- A. SAPTA staff are expected to consistently maintain a professional attitude and behavior that should reflect that of business standards. Behaviors should include the following:
 - 1. Support SAPTA's mission, goals and objectives.
 - 2. Not disclose discussion of policies or practices that effect programs before those policies and practices are adopted and disseminated by SAPTA.
 - 3. Exhibit professional judgment and identify issues requiring immediate attention and/or action – refer issues to SAPTA administration as appropriate.
 - 4. In order to minimize the frequency of special requests for information submitted to the field, staff should use internal resources before contacting the field for information.
 - 5. SAPTA employees assigned, as the program specialist/project officer for a program should develop written communication policies with the program, i.e. clearly define program staff member(s) to be contacted for specific items. The policies are to be developed in consultation with the program's chief executive officer.
 - 6. SAPTA staff should coordinate all communication with a program through the staff member assigned as program specialist/project officer for the program. A3-2 Update 2011

7. Work with other Department of Health and Human Services and the Division of Mental Health and Developmental Services programs to forge partnerships of value to the field and the public.
8. Assist and support fellow employees when possible.
9. Verify the accuracy of information prior to providing it to others.

IMPARTIALITY/CONFLICT OF INTEREST

- A. SAPTA staff are required to consider how their impartiality may be maintained whenever their involvement in any matter involving specific parties might affect personal or business relationships. A pending case, contract, grant, permit, or license are some examples of particular matters that might be of concern. When there could be an appearance of a conflict of interest, the employee must give notice of their involvement to their supervisor. Examples of possible circumstances where this could apply include:
1. A person with whom the employee has or seeks a business, contractual or other financial relationship.
 2. A person who is a member of the employee's household or with whom the employee has a close personal relationship.
 3. An organization for whom the employee's spouse, parent, child, or significant other serves as an officer, director, trustee, general partner, agent, attorney, consultant, volunteer, contractor or employee.
 4. Any organization for whom the employee has within the last year served as officer, director, trustee, general partner, agent, attorney, consultant, contractor, volunteer or employee.
 5. Any organization in which the employee is an active participant (such as volunteer, board member, consumer of services, etc.).

RELATIONSHIP WITH TREATMENT AND PREVENTION PROGRAM PERSONNEL

- A. SAPTA staff must treat the staff, boards of directors and volunteers of programs with respect and dignity at all times. Employees will observe the following:
1. Respond to requests for information within five working days of the request. If a request can not be responded to within the five-day period, immediately inform the program of the anticipated date of response.
 2. Focus all conversations both in person and via the telephone to business matters.
 3. Regardless of the circumstances, never argue, lay blame or use an accusatory tone of voice.
 4. At all times, interaction with program staff and representatives should be related to problem solving, technical assistance, and other constructive activities.
 5. To avoid potential confusion, communicate in writing when possible and/or confirm verbal communication in writing.
 6. Not allow a personal opinion or belief to impact a professional interaction or decision
 7. Avoid all forms of gossip.
 8. Avoid discussing a program with staff from another program, and avoid comparing programs.

RELATIONSHIP WITH PROGRAM CLIENTS OR PARTICIPANTS

- A. SAPTA staff must not use their positions for their own or another's personal gain. Staff are not to use their position, title or any authority associated with their office to coerce or induce a benefit for themselves or others. Employees are not to use or allow the improper use of nonpublic (private or proprietary) information to further a personal interest, either their own or another's.
- B. SAPTA staff must observe the following when dealing with alcohol and drug abuse programs or clients.
 - 1. Information regarding participation in substance abuse programs is governed by 42 CFR, Part 2 and is strictly adhered to by SAPTA staff.
 - a. The relationship between SAPTA staff and participants in prevention and treatment programs is limited to a professional one during the course of participation. A two-year period must expire after the last professional contact before establishing any other type of relationship.

RELATIONSHIP WITH THE PUBLIC

- A. SAPTA staff will conduct themselves in a professional manner at all times with members of the public. Examples of proper contact with the public include the following:
 - 1. Promptly respond to all telephone calls and written requests.
 - 2. Respond in a courteous and respectful manner with all callers, regardless of the nature of the inquiry.
 - 3. When appropriate, provide all requested information on a timely basis. If information is not available, explain reason for not being available.
 - 4. Be aware of information which is classified as being in the public domain and those items which are not in the public domain.
 - 5. Do not provide or attempt to provide counseling services to individuals requesting referral information; do not become personally involved in the situations presented by the individual.
 - 6. Follow SAPTA policies and procedures when accepting a complaint.
 - 7. If SAPTA is not the correct source of information desired by an individual, refer the individual to the appropriate agency. Provide a telephone number and/or transfer the call if possible.

APPENDIX A4

SUBSTANCE ABUSE PREVENTION AND TREATMENT AGENCY ADVISORY BOARD BY-LAWS

ARTICLE 1 – NAME

- 1.1 The name of this group shall be the Substance Abuse Prevention and Treatment Agency (SAPTA)¹ Advisory Board². Hereinafter referred to as the Board.

¹ By-laws amended to reflect name change of “Bureau of Alcohol & Drug Abuse” to “Substance Abuse Prevention and Treatment Agency” throughout the document. *Amended March 21, 2007*

² By-laws were amended to reflect name change of “Advisory Committee” to “Advisory Board” throughout the document. No other changes were made at this time. *Amended on July 20, 2005.*

ARTICLE 2 – AUTHORITY

- 2.1 The Board is authorized under NRS, Chapter 458.
- 2.2 Recommendations of the Board shall be advisory only and report to the Administrator of the Division and the Agency Director of the Substance Abuse Prevention and Treatment Agency on issues concerning drug and alcohol abuse and/or prevention.

ARTICLE 3 – PURPOSE AND FUNCTION

- 3.1 The purpose of the Board is to advise the Agency Director of the Substance Abuse Prevention and Treatment Agency concerning substance abuse issues to enhance the quality of services to achieve the following objectives:
- 3.1.1 Ensuring the availability and accessibility of treatment and prevention services;
 - 3.1.2 Reducing drug and alcohol abuse;
 - 3.1.3 Reducing the incidence of criminal involvement;
 - 3.1.4 Increasing the availability of inpatient services;
 - 3.1.5 Increasing the availability of outpatient services;
 - 3.1.6 Increasing the number of adolescents who receive treatment;
 - 3.1.7 Increasing the number of adolescents who receive prevention services;
 - 3.1.8 Ensuring that services for continuing care are available, accessible, and affordable for those in need of the services; and Substance Abuse Prevention and Treatment Agency Advisory Board By-Laws Amended March 21, 2007 A4-2 AM
 - 3.1.9 Promoting the prevention of alcohol and drug abuse.
- 3.2 The Board shall not have any policy making or regulatory authority.

ARTICLE 4 – MEMBERSHIP

4.1 The Board is hereby created.

4.2 Representation

4.2.1 The Board consists of fifteen (15) representatives. The fifteen (15) representatives shall consist of fifteen (15) members elected by the membership from a list of organizations that receive state funding.

4.2.2 Organization representatives will be selected from a list of organizations that receive state funding.

4.2.3 Each organization may appoint one (1) designee and one (1) alternate to the Board.

** By-laws amended March 8, 2002 changing membership from thirteen (13) to fifteen (15).*

4.3 Terms

4.3.1 The term of office for an organization is two years. There shall be no term limits.

4.3.2 An organization will lose representation on the Board: 1) if it does not meet

attendance requirements as listed in section 4.6; 2) if the organization ceases to receive SAPTA funding, or 3) if the organization ceases to operate as a separate entity either through dissolution or merger.

**By-laws amended December 10, 2004*

4.4 Election and Re-election

4.4.1 If an organization is removed from the Board pursuant to subsection 4.3.2, then

the nominating subcommittee will present to the Board a replacement organization that meets the conditions of subsection 4.2.2.

**By-laws amended March 8, 2002*

4.5 Board Chairs

4.5.1 The members of the Board shall elect a chairperson and vice chairperson from

the Board members.

4.5.2 The term of office for the chairperson and vice chairperson is two years. There shall

be no term limits.

** By-laws amended July 19, 2006*

4.6 Attendance Requirements

4.6.1 Advisory organizations of the Board shall maintain 75% attendance each

calendar year. Advisory organizations who are absent without excuse or permission from the chair in excess of 25% or who miss three (3) consecutive meetings without Substance Abuse Prevention and Treatment Agency Advisory Board By-Laws Amended March 21, 2007 A4-3 AM Update 2011

excuse or permission from the chair will forfeit their seat on the Board in accordance with removal procedures set forth in subsection 4.7.

**By-laws amended January 17, 2007*

4.7 Grounds and Procedure for removal. Members of the governing Board may be removed for any of the following reasons:

4.7.1 Violation of conflict of interest.

4.7.2 Not meeting the attendance requirements of 4.6 above.

4.7.3 The Membership and Nominating Subcommittee shall be charged with inquiring into

any issue regarding 4.7.1 and/or 4.7.2 as it pertains to a current Board member. The member in question shall be notified prior to the inquiry beginning and shall be given ten (10) days to provide the subcommittee with a written report, which the subcommittee must consider during its inquiry. The subcommittee shall make a report to the Board on all such inquiries. A written summary of the subcommittee's findings shall be forwarded to the member in question and agency represented within ten (10) days of the subcommittee's decision.

** By-laws amended March 21, 2007*

ARTICLE 5 - VOTING

5.1 Each appointed and/or designated Board member shall have one vote. Such vote may be either in person or by proxy.

5.2 A quorum shall consist of attendance by a simple majority of the member organizations, and one officer of the Board. **By-laws amended January 23, 2006*

5.3 A concurrence of at least a majority of the members (present) of the Board shall be required on all questions.

ARTICLE 6 – OFFICERS

6.1 Board officers shall be elected and include a chairperson and vice chairperson.

6.1.1 The chairperson and vice chairperson shall be elected at the first meeting on

even years by a majority vote of all Board members.

6.1.2 Ballots shall be written unless there is only one nominee for the office.

6.1.3 If a majority is not received on the first ballot, balloting shall continue until one

member receives a majority.

6.1.4 Terms of office shall be for two (2) years with no term limits.

**By-laws amended July 19, 2006*

6.2 Vacancies

6.2.1 When a vacancy occurs in the office of chairperson, the vice chairperson shall assume the office and duties of chairperson.

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6.2.2 When a vacancy occurs in the office of vice chairperson, a new vice chairperson

shall be elected to complete the remainder of the term.

6.3 Duties

6.3.1 The chairperson shall be the chief executive of the Board and shall have general

supervision, direction and control of affairs of the Board. He or she shall preside at all meetings of the Board. He or she shall be a member, ex-officio, of all subcommittee except the nominating subcommittee and shall have general powers and duties usually vested in the president of a corporation. He or she shall be the spokesperson of the Board in all policy and procedure matters.

6.3.2 The vice chairperson shall act for and on behalf of the chairperson in all cases of

his/her absence.

ARTICLE 7 – COMPENSATION

7.1 No compensation is expected and funding is not allocated.

ARTICLE 8 – STAFFING

8.1 The Substance Abuse Prevention and Treatment Agency for purposes of secretarial, research, and other needs shall provide staff to the Board.

ARTICLE 9 – MEETINGS

9.1 The Board shall meet at least quarterly and at the times and places specified by the call of the chairperson.

9.2 A quorum shall consist of attendance by a simple majority of the member organizations, and one officer of the Board.

9.3 Agenda items may be submitted in writing, no later than fourteen (14) days before the meeting, by the Substance Abuse Prevention and Treatment Agency and/or Board members.

9.4 Meetings will generally follow parliamentary procedure as contained in Robert's Rules of Order insofar as they do not conflict with the NRS and these bylaws.

9.5 Meetings shall be conducted in accordance with NRS chapter 241, known as "Nevada's Open Meeting Law".

ARTICLE 10 – SUBCOMMITTEES

10.1 The chairperson may appoint a subcommittee of the Board to study and make recommendations regarding a specific issue as requested by the Administrator or a Board member. The composition of the subcommittee must be approved by a majority vote of the Board.

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10.2 Terms of subcommittee appointments:

10.2.1 The terms of the members of each subcommittee shall be determined by the

Board chairperson, not to exceed twelve months. Any member of a subcommittee may be reappointed. A subcommittee shall remain active until terminated by a majority vote of the Board.

10.3 Membership

10.3.1 At least three (3) Board members shall serve on each subcommittee. Additional

members shall be recommended by the Substance Abuse Prevention and Treatment Agency and/or Board and need not be members of the Board.

10.3.2 Subcommittees shall be chaired by a member of the Board.

10.3.3 The Board shall be informed of subcommittee activities by periodic reports.

ARTICLE 11 – STAFFING

11.1 Staff to the subcommittees shall be provided by the Substance Abuse Prevention and Treatment Agency for purposes of secretarial, research and other needs.

ARTICLE 12 – AMENDMENTS

12.1 Proposed amendments to the bylaws shall be submitted in writing to any member of the Board fourteen (14) days prior to any regular meeting.

12.2 The bylaws may be amended at any regular meeting of the Board by a two-thirds (2/3) vote of those attending, provided the amendment has been submitted in writing, and placed on the agenda.

ARTICLE 13 – CONFLICT OF INTEREST

13.1 The Agency will survey its Board members annually to collect information regarding their affiliations outside the Agency. Each member is responsible for fully disclosing all current affiliations.

13.2 Conflicts of interest must be declared by members prior to discussion of any matter that would provide direct financial benefit for that member, or otherwise have the appearance of a conflict of interest. When funding or other decisions are made regarding an organization with which the member has an affiliation, the member shall state his intention to abstain from making specific motions or casting a vote, before participating in related discussion. The chair or a majority of the Board may also declare a conflict of interest exists for a member, and ask that the member be removed from the voting process.

**By-laws amended January 23, 2006* Substance Abuse Prevention and Treatment Agency Advisory Board By-Laws Amended March 21, 2007.

ADOPTED AND APPROVED this _____ day of _____, two-thousand and _____.

Chair, Substance Abuse Prevention and Treatment Agency Advisory Board
Advisory Board Members:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

APPROVED:

Harold Cook, PhD, Administrator
Nevada Division of Mental Health and Developmental Services

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Update 2011

UNDER REVISION 08/01/2014

**SUBSTANCE ABUSE PREVENTION AND TREATMENT AGENCY
ADVISORY BOARD**

DISCLOSURE STATEMENT – STATE FISCAL YEAR 2008

The Substance Abuse Prevention and Treatment Agency Advisory Board Bylaws include the following statements regarding Conflicts of Interest:

The Agency will survey its Board members annually to collect information regarding their affiliations outside the Agency. Each member is responsible for fully disclosing all current affiliations.

Conflicts of interest must be declared by members prior to discussion of any matter that would provide direct financial benefit for that member, or otherwise have the appearance of a conflict of interest. When funding or other decisions are made regarding an organization with which the member has an affiliation, the member shall state his intention to abstain from making specific motions or casting a vote, before participating in related discussion. The Chair or a majority of the Board may also declare a conflict of interest exists for a member, and ask that the member be removed from the voting process.

Please list any of the following affiliations in the lines below: 1) Employers; 2) Boards or Commissions; 3) Organizations in which you or any member of your immediate family has a substantial or material interest and, to your knowledge, the Agency has a grant, contract or cooperative agreement with; 4) Any allegiance or financial interest you or any member of your immediate family has that might affect or appear to compete with your duties on the SAPTA Advisory Board.

1. _____
2. _____
3. _____
4. _____
5. _____

Name (please print) Signature

Date

Please complete the form and return to SAPTA no later than _____.

Fax to 775 684-4185, attention Office Manager or mail to 4126 Technology Way, 2nd Floor, Carson City, NV 89706.

Thank you very much for your adherence to the Bylaws.

APPENDIX A7
Department of Health and Human Services
Division of Mental Health and Developmental Services
Substance Abuse Prevention and Treatment Agency (SAPTA)
Complaint Investigations and Critical Incident Reporting Policy

Policy: It is the policy of the Substance Abuse Prevention and Treatment Agency (SAPTA) that all critical incidents will be reported immediately to the Agency Director, or designee. The Agency Director will be responsible for notifying the Division Administrator or Deputy Administrator of the Division Mental Health and Developmental Services; the Division Administrator will report any high profile or unusual incidents to the Director of the Department of Health and Human Services. The Division Administrator or Deputy Administrator will be responsible for determining what constitutes high profile or unusual incidents.

Purpose/Reference: SAPTA has the responsibility of ensuring the safety and interests of all its contract clients, participants, employees, volunteers and visitors as a “high priority” by immediately responding to and addressing any critical incidents described within this policy, and taking appropriate measures to remediate or rectify them. All individuals who are actively receiving or providing services from a SAPTA funded program will be required to complete a report in the event of a critical incident. All critical incidents will be reported on a Critical Incident Reporting Form (Attachment A).

Definitions and Reporting Codes: The letters in parenthesis at the end of each category are data entry codes. Critical incidents are categorized as follows:

- I. Suicide (S) - Deliberately self-inflicted death of a person receiving services.
- II. Death (D) - Death of a person receiving services not caused by suicide or death of an employee during working hours.
- III. Suicide Attempt/Threat (SA) - Act committed by a person receiving services in an effort to cause their own death or a plausible statement that they intend to hurt themselves. A threat of suicide does not have to be reported to the Agency, but should be part of the funded program’s internal incident report (substance abuse treatment programs should assure that their internal agency policies address this).
- IV. Assault/Violence/Threat (AV) - Instances in which a person receiving services assaulted someone or is assaulted, or a person receiving services makes or receives threats of harm or violence.
- V. Abuse/Neglect (AN)- Abuse is defined as any willful infliction of pain or injury upon a person receiving services by anyone else. This includes, but is not limited to:
 - Rape, sexual assault or sexual exploitation of the client;
 - The use of any type of aversive intervention;
 - Except as otherwise provided in NRS 433.5486, a violation of NRS 433.549 and;

- The use of physical, chemical or mechanical restraints or the use of seclusion in violation of federal law.

Any act which meets the standard of practice for care and treatment does not constitute abuse.

Neglect means any omission to act that causes injury to a client or that places a client at risk of injury, including, but not limited to, the failure to follow:

- An appropriate plan of treatment to which the client has consented;
- The policies of the facility for the care and treatment of clients; and
- Standard of practice, which means “the skill and care ordinarily exercised by prudent professional personnel engaged in health care.”

VI. Eloped/Missing/AWOL (A) - Any person receiving services who is missing from a funded program’s facility. People receiving services who are discharged against medical advice (AMA) are not considered eloped.

VII. Injury/Illness (I) - A physical injury or illness incurred while a person is under the supervision of a funded program that is serious enough to require medical attention or admission to an acute care hospital. Any accident occurring in the course of employment that results in the hospitalization of three or more employees must be reported to OSHA within 8 hours after the accident is reported to any agent or employee of the employer, per NRS 618.378.

VIII. Legal/Criminal (L) - A person receiving services is suspected or accused of committing a crime, or program staff contact with law enforcement or media regarding alleged criminal activity by a person receiving services. Also, reports in the media regarding alleged client criminal activity.

IX. HIPAA (H) - If there has been a HIPPA violation, this shall be noted in the incident report and the Division’s HIPPA Officer will be notified immediately following receipt of the report by SAPTA.

X. Other (O) - Any event that adversely affects, or has the potential to affect, the health and safety of a person receiving services, provider staff or volunteers who are on-site for any purpose that does not fall into one of the other categories above. This includes, but is not limited to, the following examples:

- Evacuations, fires, floods, hazardous materials events;
- Property damage;
- Sexual acting out that does not meet the definition of abuse;
- Potential media events; and
- Potential agency liability issues.

Procedures: In the event of a critical incident involving one or more clients, staff or volunteers, SAPTA funded programs will follow the reporting procedure set forth below:

I. All SAPTA Funded Programs: All critical incident events will be reported using the designated reporting codes indicated above on the Critical Incident Reporting Form. A typed report on the form detailing information regarding the client/program participant

and a detailed description of the event, including the names of witness(es), will be e-mailed or faxed to SAPTA as soon as possible, but in no case, later than the end of the first working day after the incident occurs. This policy/procedure does not preclude the normal course of documentation in client files.

- II. The SAPTA Agency Director or designee will verbally notify the Division Administrator or Deputy Administrator within thirty (30) minutes of becoming aware of any critical incident that may be considered high profile or of media interest. Outside of regular work hours (Monday-Friday, 8am-5pm), the Agency Director or designee will call the Division Administrator or Deputy Administrator at home or on the pager system.
- III. The Division Administrator or Deputy Administrator will notify the Department Director of a critical incident that may be considered high profile or of media interest. Outside of regular work hours, the Division Administrator or Deputy Administrator will attempt to contact the Department Director; however, if the Director is unavailable, the assistant to the Governor will be contacted.
- IV. A copy of the incident report will be sent by the Division to the Deputy Attorney General. If the incident is considered high profile or of media interest, the Division will provide a copy of the incident to Department Director.
- V. SAPTA will determine if a formal investigation of the incident is warranted and will determine how the investigation should be conducted. If a decision is made by the Division Administrator or Deputy Administrator to have the investigation completed by staff outside of SAPTA, the Division Administrator will appoint the investigators. A typed and detailed report of the results of the investigation, along with recommendations, will be forwarded to the Agency Director; a final report will be forwarded to the Division Administrator or Deputy Administrator within ten (10) working days of the investigation being assigned. Investigators will follow established protocols and procedures in completing their report. Within five days (5) of receipt of the investigation report, the Agency will forward the investigation report to the Executive Director of the reporting program with a request for a Corrective Action Plan. The incident may be closed at the time an investigation has commenced, in which case all correspondence, corrective action and follow-up will be focused on the results of the investigation.
- VI. If a formal investigation is not warranted, a follow-up report will be sent to the Agency ten (10) working days after the initial incident report. Follow-up reports will be forwarded by SAPTA to the Division as requested by the Division Administrator or Deputy Administrator until closure of the incident is appropriate.
- VII. In the event of a client death, a copy of the coroner's report will be requested by SAPTA. If it appears that the client's death was due to other than natural causes, a detailed description of the client's service history will be included in the initial incident report, and a formal death review will be requested. A copy of all incident reports of client deaths will be forwarded to SAPTA's Medical Director and MHDS's Medical Director. After consultation between the two, the MHDS Medical Director will make the decision if further information or a more in-depth review is necessary.

In the event of an employee death or an accident which results in the hospitalization of three or more employees during working hours, the appropriate program director will notify OSHA within 8 hours of the death or accident, per NRS 618.378.

- VIII. The decision to notify law enforcement of any client incident will be made by the provider's Executive Director. If law enforcement agencies are to be notified, the notification must occur within 24 hours of the incident. In the event of stolen property from a State agency, law enforcement must be notified immediately. If confidential information, such as a client's name, is disclosed to law enforcement agencies, a formal denial of rights must be filed at the time such notification occurs.
- IX. The provider Executive Director may request assistance from MHDS through SAPTA for assistance in briefing staff involved in residential death, other unusual death, or critical incident of high profile or unusual circumstances. SAPTA will notify the Division, and Division staff trained in de-briefing will be utilized to meet with program staff and conduct the de-briefing. The de-briefing will take place no more than five days after the incident occurs. The de-briefing is intended to provide support to staff involved in difficult or unusual incidents.
- X. Suicides or high profile/unusual deaths will be reported by SAPTA to the Division, the Mental Health Commission, and to the Department at the closure of the incident.
- XI. Each provider will develop specific written procedures to implement this policy or will incorporate this policy into their existing policy and procedures manual. Programs will also incorporate into their policy manuals any regulations or procedures set forth by their accrediting bodies specific to the reporting or investigating of critical incidents and client deaths.

Attachments: Forms are provided on the following pages. A7-5 Update 2011

Mental Health and Developmental Services
 Substance Abuse Prevention and Treatment Agency (SAPTA)
 Critical Incident Reporting Form
 Quality Assurance

CONFIDENTIAL

Program Name: _____ Incident #: _____
 SAPTA Use Only _____

☐ Description of the event (initial report) ☐ Follow-up information

Event Date: _____ Event Time: _____ Reporting Code: _____

Reported to: _____ Location: _____

Client/Participant Identifier: _____ ☐ Prevention Service Status: _____

Birth date: _____ ☐ Treatment Service Status: _____

Summary of contacts made by the program (Check all that apply):

<input type="checkbox"/> Notified 911/Police	<input type="checkbox"/> Notified Legal Guardian	<input type="checkbox"/> Notified Coroner
<input type="checkbox"/> Notified SAPTA	<input type="checkbox"/> Notified DCFS	<input type="checkbox"/> Other (explain below)
<input type="checkbox"/> Notified BHCQC		

Other actions taken by CEO or designee: _____

Known witness(es) to the event: _____

Name (Employee Identifier): _____

Position within the program: _____

Description of the event (please include *what* happened, *where* it happened, *when* it happened and *how* it happened). Please include any observations made by staff interventions. Use additional sheets if necessary.

 Signature of Person Completing Form Date

 Signature of Program Director Date

 Signature of Agency Director Date

**Mental Health and Developmental Services
Substance Abuse Prevention and Treatment Agency (SAPTA)
Critical Incident Reporting Form
Quality Assurance**

CONFIDENTIAL

Program Name: _____ Incident #: _____
SAPTA Use Only _____

PARTICIPANT INFORMATION

Please complete pertinent information for each person involved in the incident, regardless of whether the person is a client, staff or other. DO NOT REPEAT the information given on Page 1 of this form.

Name or Identifier: _____ Birth Date: _____

Gender: ☐ Male ☐ Female Service Status: _____

Ethnicity: _____

Diagnosis

Axis I: _____

Axis II: _____

Medications: _____

Name or Identifier: _____ Birth Date: _____

Gender: ☐ Male ☐ Female Service Status: _____

Ethnicity: _____

Diagnosis

Axis I: _____

Axis II: _____

Medications: _____

APPENDIX A8

SAPTA POLICY ON LETTERS OF SUPPORT

The State Division of Mental Health and Developmental Services (MHDS), Substance Abuse Prevention and Treatment Agency (SAPTA), as the Single State Agency (SSA) for Substance Abuse in Nevada, is the principle agency that works to reduce the impact of substance abuse in the state. In this capacity, SAPTA is solicited to coordinate letters of support and/or collaboration with the MHDS Administrator to be provided to organizations and governmental agencies to support their grant applications covering myriad health and welfare projects. Requests must provide sufficient background information for SAPTA to evaluate the level and appropriateness of a letter of support from the MHDS Administrator.

To insure that those entities requesting letters of support and/or collaboration are provided with the requisite support and collaboration consistent with the project for which they are applying, the following procedures apply:

- Under normal circumstances, requests for letters of support and/or collaboration should be submitted to SAPTA at least two weeks prior to the due date of the grant application.
- In all circumstances, requests for letters of support and/or collaboration should be accompanied by a one page executive summary, similar to the executive summary required by most federal agencies in their grant application instructions, outlining the purpose of the project for which the grant application is being submitted.
- In addition to the executive summary, requests must include a brief description of the program narrative outlining the scope of work to be performed and a copy of the budget proposed to accomplish the project.
- All requests for letters of support and/or collaboration must include the organization and address that the letter is to be directed and the name of the project and the Grant Funding Announcement (GFA) number.
- Requests for letters of support and/or collaboration must have a draft sample letter for review.
- It is imperative that organizations requesting letters of support and/or collaboration demonstrate that collaboration is critical to the success of the proposed project specified in the grant proposal, as opposed to a letter which is requested simply to show generic support.

It is recognized that mitigating circumstances may necessitate deviation from established procedures, however, significant justification must be provided, and determinations will be made on a case-by-case basis.

APPENDIX A12

SUBSTANCE ABUSE PREVENTION AND TREATMENT AGENCY (SAPTA) PREVENTION CERTIFICATION APPLICATION

Agency Name: _____

Mailing Address: _____
Street/P.O. Box City Zip Code

Site Address: _____
Street/P.O. Box City Zip Code

Telephone Number: _____ Fax Number: _____

Email: _____

Program Director's Name: _____

Program Director's Signature: _____ Date: _____

Application approval by:

Program Operator or Authorized Representative's Name: _____

Signature: _____ **Date:** _____

These signatures verify the program and its operations are in compliance with all applicable state and federal laws including, if applicable: 42 CFR, Part 2, and HIPAA 45 CFR, Parts 160, 162 & 164.

Check appropriate box:

	Certification	Re-certification
Coalition		
Coalition Sub-recipient		
Administrative Program		
Non-Funded		

Nevada Administrative Codes 458 and the Nevada Revised Statutes 458 establish certification standards.

The non-refundable certification fee is \$100.00. Make checks payable to SAPTA and mail to address below.

SAPTA
Attn: Minden Hall
4126 Technology Way, 2nd Floor
Carson City, NV 89706
Phone: 775-684-4190 Fax: 775-684-4185

Agency Use Only

Date Application Received: _____

Date Payment Received: _____

Date Check Cleared: _____

APPENDIX A13

COMPLIANCE MONITOR INSTRUMENT

State of Nevada
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF MENTAL HEALTH AND DEVELOPMENTAL SERVICES
SUBSTANCE ABUSE PREVENTION AND TREATMENT AGENCY
Administrative Compliance Monitor Instrument

A. Agency Information	Complete prior to site visit.				
Agency & Program Name					
Grant Number		Funding Amount		Funding Period	
Director					
Mailing Address					
Site Visit Address(es)					
Telephone		Fax		E-mail	
Person(s) Providing Information	Program Information				
	Fiscal Data				
Date(s) of Monitor					
SAPTA Analyst					

B. Grant File Review Complete prior to site visit.	Documentation to be reviewed may include but is not limited to:	Y	N	Comments
1. Has there been any scope of work and/or fiscal amendments to the subgrant? (Grant Assurances)	SAPTA grant file			
2. Does the grant file contain a copy of the agency's last audit and management letter? (Grant Assurances)	SAPTA grant file			Date of audit: Date of management letter:
3. Has the program submitted quarterly reports to SAPTA? [NRS 458.025, NAC 458.228 (5 a & b 1-2(I-III))]	SAPTA grant file			
4. Does the grant file contain a copy of the last Certification and Monitor Report? Were any discrepancies noted that need to be re-checked for compliance?	SAPTA grant file			

C. Fiscal Document Review	Documentation to be reviewed may include but is not limited to:	CAP Code	Y	N	Comments
1. Do agency policies and procedures specify that different people prepare checks, sign checks, reconcile bank accounts, and have access to bank accounts? (Grant Assurances)	Agency fiscal policy and procedures	B			
2. Do agency policies and procedures identify individuals in the organization who are authorized to sign checks? (Grant Assurances)	Agency fiscal policy and procedures	B			Titles of authorized individuals:
3. Do agency policies and procedures require the check signer to review documents in support of checks presented for his/her signature? (Grant Assurances)	Agency fiscal policy and procedures	B			
4. Are tax deposits up to date (FICA, Withholding, EICON, and ESD)? Only necessary if SAPTA fiscal monitor has not been conducted within last 12 months. (Grant Assurances)	Review deposit slip and bank statement for last quarter	B			Date of bank statements or deposit slip:
5. Does an inspection of program's last bank statements, deposit slips, etc. satisfactorily trace the deposit of grant funds into the agency's account? Only necessary if SAPTA fiscal audit has not been conducted within last 12 months. (Grant Assurances)	Last draw request, appropriate bank statements, deposit slips, journals, etc.	B			Date of reimbursement check: Date identified in fiscal records: Bank statement showing deposit:
6. Does the program have back-up documents (pay ledgers, invoices, etc.) to support the last Monthly Draw Request for Reimbursement (GA-14) submitted to SAPTA? Only necessary if SAPTA fiscal monitor has not been conducted within last 12 months. (Grant Assurances)	SAPTA staff will bring copy of last GA-14 backup and will cross reference to actual fiscal files	B			Date of GA-14: Amount: Documents Reviewed:

UNDER REVISION 08/01/2014

D. Agency Review	Documentation to be reviewed may include but is not limited to:	CAP Code	Y	N	Comments
1. Is the agency accomplishing the goals and objectives identified in the scope of work as indicated in the subgrant award including compliance with State and Federal rules and regulations? (Grant Assurances)	SAPTA grant file, Agency reports, observation	B			
2. Is the geographic area being served by the agency consistent with the scope of work as indicated in the subgrant award? (Grant Assurances)	Agency reports, meeting minutes, observation	B			
3. Has the agency encountered problems in meeting its scope of work and SAPTA reporting requirements? If yes, does the agency have a written plan to correct the problems? (Grant Assurances)	Agency reports, NHIPPS	B			
4. Has agency personnel received the required Prevention and/or related training? (Grant Assurances)	Individual training plans	B			
5. As appropriate, do agency documents identify the Mental Health Division, Substance Abuse Prevention and Treatment Agency, and SAMHSA as a funding source? Is correct attribution used? (Grant Assurances)	Agency literature, brochures, etc.	C			

THIS SECTION LEFT INTENTIONALLY BLANK

Findings/Recommendations/Follow-up: The following indicates specific observations, comments, recommendations and/or timelines.

Prepared By: _____
Agency Analyst

Date: _____

Reviewed By: _____
Agency Supervisor

Date: _____

Date Mailed to Agency: _____

The following reflects the timelines that will be observed during the monitor process:

- SAPTA must submit final monitor visit report to coalition within 20 working days.
- Within 10 working days of receipt of compliance action plan, SAPTA must approve or reject and return it.
- If plan is rejected, coalition has 5 working days from receipt of rejection to contact their assigned Program Analyst to resolve the conflicts.

The CAP Code column indicates the priority rating of each item and each item is ranked as A, B, or C. Noncompliance must be implemented based on the following:

A – Requires a Compliance Action Plan completed at Exit Interview and issue addressed within 24 hours.

B – Issues in this category are addressed at the Exit Interview and requires a Compliance Action Plan submitted to SAPTA within 10 days of the monitor visit.

C – Must be corrected before the next monitor visit – Does not require a Compliance Action Plan

APPENDIX A14

Sample Model Policy Emergency Relocation

Policy

In the event an emergency situation arises which deems it necessary for an organization to close temporarily (e.g., in the case of a fire or utility problem that cannot be fixed in a short time), the organization has developed a contingency relocation procedure to ensure the continuation of services to the persons served.

Procedure

- If there is a need to vacate the premises:
 - Continuation of essential services for outpatient programs whose facility is not usable is of prime concern and is accomplished through a written, temporary transfer agreement with another organization offering similar services to the persons served or, if available to another, nearby location of the organization that has suffered the loss.
 - Continuation of essential services in a residential program, including, but not limited to, treatment, sleeping accommodations, meals, and laundry is of prime concern if the facility is deemed not useable. Arrangements are made to relocate program participants in appropriate facilities with which the organization has a written arrangement or to another facility that is operated by the organization.
- The referring organization's chief executive is to contact the relocation site and make arrangement for the transfer of persons served.
- The Substance Abuse Prevention and Treatment Agency is to be contacted in the event of a transfer of program participants to another organization or to another location operated by the organization.
- Any and all costs occurred are the responsibility of the referring agency.

Relocation Sites with Which an Agreement Has Been Established

(Name) _____ Contact Person: _____

(Address) _____

(Telephone Number) _____

(Name) _____ Contact Person: _____

(Address) _____

(Telephone Number) _____

Relocation Agreement

In the event that the facility of _____ or _____ is temporarily not usable, it is mutually agreed that each organization will accept the persons served by the other organization until the facility that is not usable becomes usable again.

In the event that the facility is no longer usable, the organization making the referrals agrees that persons served will be transferred to the accepting organization on a permanent basis.

In the event that the referring organization's facility is available or if the referring organization obtains another facility, the accepting and referring organizations agree to transfer the persons served, with their permission and agreement, to the referring organization.

This agreement also provides for continuity of treatment with staff members of the organization making the referral where possible. Staff members of the referring organization will be considered for temporary affiliation with the organization accepting the referrals and, in the event of permanent closure of the referring organization's facility, will be considered for full affiliation with the organization accepting the referrals.

This agreement may be severed by either organization by giving the other organization at least 30 days written notice.

Agreed to on _____, 20____ by:

(Name) _____ (Name) _____

(Title) _____ (Title) _____

(Organization) _____ (Organization) _____

A15-1 Update 2011
APPENDIX A15
Department of Health and Human Services
Division of Mental Health and Developmental Services
Substance Abuse Prevention and Treatment Agency (SAPTA)
Funding Process

The Substance Abuse Prevention and Treatment Agency (SAPTA, Agency) competitive funding protocols are designed to focus on input received from an independent Objective Review Committee. The objective review meeting and funding recommendation meeting are open to the public. The final funding decisions will be made by the Administrator of the Division of Mental Health and Developmental Services.

The process is essentially the same regardless of funding type or source; the only exception is for the State Prevention Infrastructure Funding (SPI) which will be addressed below. It begins with the release of a multi-year Request for Applications (RFA). Please refer to the flow chart on page 6 of this document.

Request for Application: SAPTA uses the RFA to announce the availability of funding, specify the funding requirements and purposes of the funding, and provide instructions to guide in the preparation of an application. Project periods are for up to three years with non-competitive continuations granted to programs based upon availability of funding and successful progress of negotiated scopes of work in the intervening years.

Bidders Conferences and Questions: The process may vary slightly between prevention and treatment. Along with explicit instructions on how to complete the RFA, the Agency generally conducts Bidders Conferences to provide technical assistance on responding to the RFA.

The conferences are made available to interested parties in Northern and Southern Nevada (videoconferencing) and can be up to two days in length. The conferences are open to new, returning, or previously unsuccessful applicants. A complete review of the RFA is provided, along with time provided for individual assistance to potential applicants. Any new requirements specific to the funding are discussed with all participants. Questions are accepted throughout the process and are answered by staff as they arrive at SAPTA with a commitment to respond to each inquiry within two days of the request. Additionally, once a week all questions and answers are sent to applicants who have filed a Letter of Intent.

Letters of Intent: A Letter of Intent (LOI) is required for all programs interested in applying for funding. This is done in order to identify the organizations that need the entire RFA packet which includes, among other things, numerous application forms and technical information. As noted above, this ensures that SAPTA knows who needs the questions and answers that are sent out weekly. Additionally, this allows the Agency to better anticipate the needs of the objective review process in terms of number of reviewers and number of days needed to complete the review.

Completeness Reviews: Prior to sending the applications on for Staff Technical Reviews and Objective Reviews, the Applications are reviewed for “completeness.” This process identifies those applications that have not met the requirements of the RFA and/or were received late. Applications that do not pass the completeness review are returned to the applicant along with a letter of explanation. These applications are not reviewed.

RFA Contents: The RFA includes information such as the prevention or treatment Program Operating and Access Standards (POAS), Nevada Health Information Provider Performance System (NHIPPS) data reporting requirements, and funding priorities. Base state and federal funding requirements are addressed as well as suggestions to ensure the submitted applications are complete and deadlines met. Each subsequent RFA issued by SAPTA incorporates changes from prior RFA processes and reflects the Agency’s commitment to continuous quality improvement. These changes and additions ensure that SAPTA continues to meet state and federal requirements and is able to report on the required federal National Outcome Measures (NOMs).

Objective Reviewers: Concurrent to releasing the RFA, the Agency invites community members to be reviewers. This is done using a newly developed form; a copy is attached. Advertisements are placed in local newspapers soliciting responses to the RFP. As applications come in, they are entered into a database and sorted by interest. Once it is known how many reviewers will be needed the database information is sorted and examined to determine if there are an adequate number of reviewers. Objective Reviewers can also be chosen directly from partner agencies and advisory committees. If more reviewers are needed, further solicitations take place by the Agency until there are sufficient numbers to conduct the Objective Reviews. Conflict of Interest information is reviewed to ensure that no issues arise.

Objective Review Committee: Once applications have been deemed to be complete they are forwarded to the Objective Review Committee and Agency staff. SAPTA conducts a brief orientation and training telephone conference call for the Objective Review Committee members covering the review process and forms. The scoring sheets repeat the RFA instructions and allow for comments and scoring. The members receive the applications as well as information on the performance of applicant agencies and programs that were funded in the past. The Objective Reviewers review the applications on their own and bring the completed sheets to the meeting. Depending upon the number of applications to be reviewed, reviewers may be assigned to serve as either a primary reviewer, secondary reviewer, or a reader.¹ In some cases, the reviewers will receive all of the applications and are asked to review them all if time allows.

¹ Depending upon the number of applications SAPTA staff may decide to utilize a different review model

Staff Technical Reviews: SAPTA staff meets as soon as the applications are deemed complete. The staff technical reviews are conducted by both the fiscal team and the team which has responsibility in the area being funded (treatment, prevention coalitions, prevention direct service, etc.). The teams then meet and complete a review form together which will be presented by a team analyst at the Objective Review Committee meeting.

Review Meeting: The review meeting may be facilitated by an outside group facilitator who does not read or score the applications. The review begins with the facilitator discussing the type A15-3 Update

2011 of review to be conducted: funding is fully competitive, the applications must be scored and ranked or formula funded, the applications must be reviewed but not necessarily scored and ranked. The decision on how to proceed with formula funded applications is made in consultation with the Objective Review Committee with the concurrence of the senior SAPTA staff member present.

The review then moves on with the SAPTA analyst assigned presenting the Staff Technical Review to the objective reviewers. This is followed by the assigned primary reviewer reading his or her review(s) and the secondary reviewer(s) doing the same. The readers then add to the review with any comments not addressed by the previous reviewers.² A brief discussion then follows, after which each reviewer scores the application and makes a funding recommendation on a form provided for this purpose. These forms are collected from the reviewers and given to SAPTA staff that will add up the scores and funding recommendations, and average them.³ Completed review forms are also collected at this time from all the reviewers assigned to complete them. This process continues until all the applications have been reviewed.

2 If SAPTA staff chooses a different review model then this process will be adjusted as necessary.

3 In those cases where there is no need to score the applications, the strengths and weaknesses of the applications will be documented instead of the scores.

4 Consensus is defined as: An opinion or position reached by a group as a whole (*American Heritage Dictionary*).

Funding Recommendations: SAPTA staff will prepare a unified list noting each application scored in rank order with its funding recommendation. Once all reviews have been completed the facilitator will lead a discussion among all objective reviewers to determine if there is a need to adjust the recommendations. If the group wishes to make changes they are free to do so at this time; however, there must be a *consensus*⁴ to do so. SAPTA staff does not participate in this part of the process. The resulting funding recommendations are then taken to the Division Administrator.

Funding Decision: SAPTA staff will compile the information from the Objective Reviews into a database and prepare forms that summarize the reviews. These forms will be available for the Division Administrator and for the applicants. Additionally, as needed, the staff will prepare a briefing for the Administrator addressing any issues not covered during the review meeting that they deem important for the Administrator to know prior to making funding decisions. The staff will meet with the Administrator and review all the information. The Administrator will direct the staff on his/her decisions; the staff will then write up the decisions for his final review. Staff will schedule a public meeting during which the Administrator will announce the funding decisions.

Once the decisions have been announced, the Administrator will direct the Agency Director and SAPTA staff to contact successful applicants and complete scope of work and budget negotiations. Unsuccessful applicants will also be contacted at this time. An explanation of how to appeal the decision will be included in the correspondence that conveys the funding decisions.

There is a slight variation to this process for treatment applications: For treatment applications, the Agency solicits clinical input from the Center for the Application of Substance Abuse Technologies (CASAT) at the University of Nevada Reno. CASAT helps review the treatment applications to determine the applicants' clinical effectiveness and use of Evidence- Based Practices. This information is then provided to the Objective Reviewers to assist them in their reviews.

PreventionFunding Process: The process outlined above will be used by SAPTA’s certified and funded substance abuse prevention coalitions to award implementation funding available from the state general fund for direct service substance abuse prevention programming. SAPTA will implement a “deeming process” similar to that used with the original State Incentive Grant to determine which coalitions are ready to assume this responsibility immediately. Key components of this deeming process will be to mirror the state process at the local level including application of necessary components from the Nevada Open Meeting Law and the role of Objective Reviewers. Those coalitions not initially ready to assume this responsibility will be given technical assistance and will partner with SAPTA to implement the SPI in their local service areas until they are ready to assume responsibility for the process. The goal of the deeming process will be for all coalitions to assume responsibility for managing these funds at the local level as quickly as feasible.

**Department of Health and Human Services
Division of Mental Health and Developmental Services
Substance Abuse Prevention and Treatment Agency (SAPTA)
Request to Serve as an Objective Reviewer Form**

I respectfully request the opportunity to serve as an objective reviewer on the SAPTA Objective Review Panel for the following funding opportunities (check all that apply):

<input type="checkbox"/>	Prevention Infrastructure
<input type="checkbox"/>	Treatment Wait List Reduction
<input type="checkbox"/>	Co-Occurring Pilot Project
<input type="checkbox"/>	Substance Abuse Prevention, Education and Awareness

I am aware that this commitment may require the following: attendance at a two-day public meeting in the Carson City area, the reading and reviewing of up to 20 applications, and the reading and scoring of up to 10 applications.

Each reviewer is responsible for fully disclosing all current affiliations. Conflicts of interest must be declared by reviewers prior to discussion of any matter that would provide direct financial benefit for that reviewer, or otherwise have the appearance of a conflict of interest. When funding or other decisions are made regarding an organization with which the reviewer has an affiliation, the reviewer shall state his intention to abstain from making specific motions or casting a vote, before participating in related discussion. The Agency or a majority of the Review Panel may also declare a conflict of interest exists for a reviewer, and ask that the reviewer be removed from the voting process. Please list any of the following affiliations in the lines below: 1) Employers; 2) Boards or Commissions; 3) Organizations in which you or any member of your immediate family has a substantial or material interest and, to your knowledge, the Agency has a grant, contract or cooperative agreement with; 4) Any allegiance or financial interest you or any member of your immediate family has that might affect or appear to compete with your duties on the SAPTA Objective Review Panel (Attach additional sheets as needed).

1. _____
2. _____
3. _____
4. _____
5. _____

Name (please print)

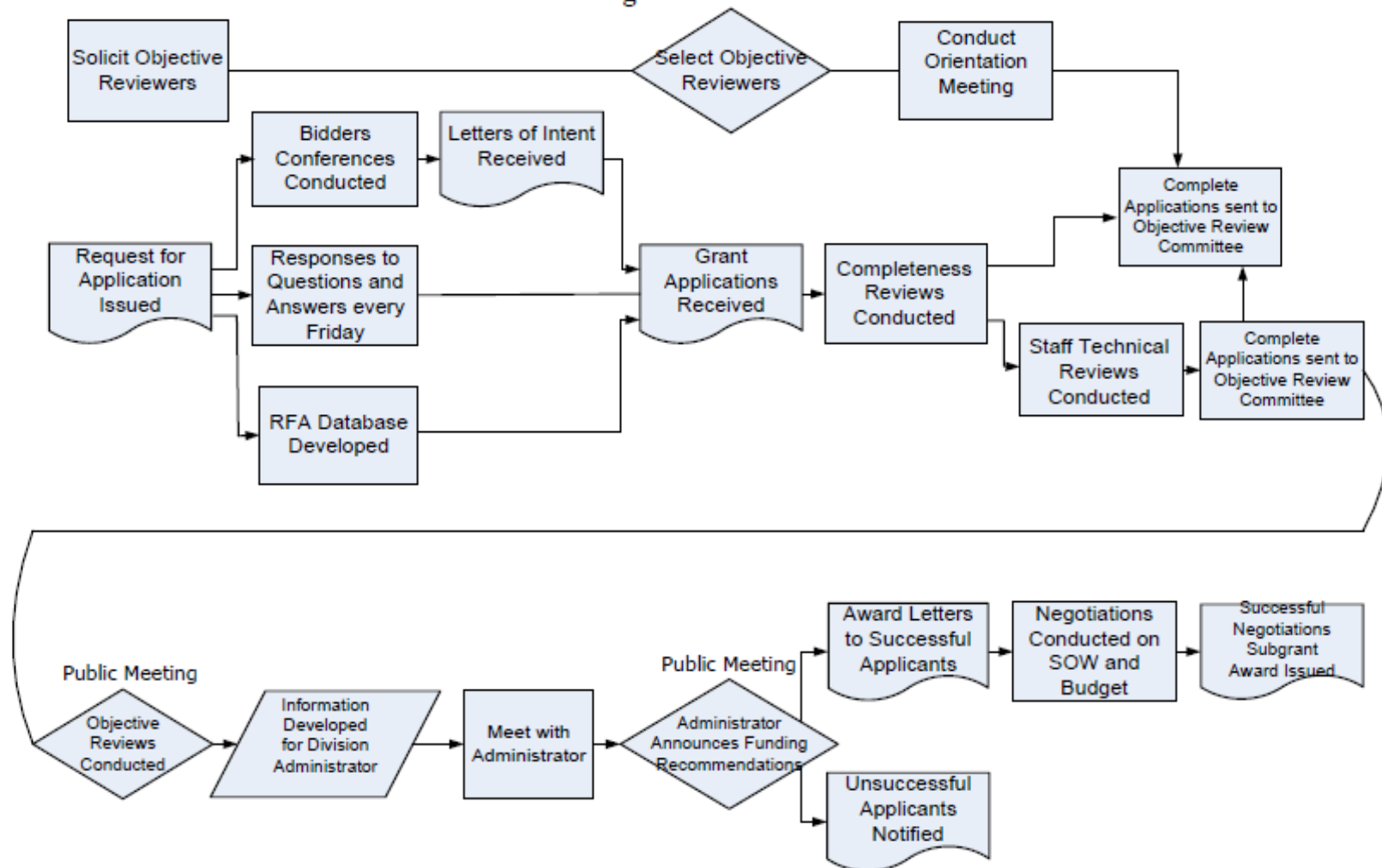
Signature

Date

Contact Address, Phone Number, E-mail

Fax completed form to 775 684-4185, Attention: Office Manager, or mail completed form to 4126 Technology Way, 2nd Floor, Carson City, NV 89706. Thank you

Request for Application (RFA) Process Funding Decisions



APPENDIX A15a

FUNDING SOURCE INFORMATION

The information below describes the various funding sources received by the Substance Abuse Prevention and Treatment Agency (SAPTA). Most of the funds are passed-through to subgrantees.

- Substance Abuse Prevention and Treatment Block Grant (SAPTBG): According to SAPTBG, these funds are available to support all types of treatment and prevention for both alcohol and other drug abuse.
- State General Funds: These funds are available to support all types of treatment for both alcohol and other drug abuse. To ensure uniform provision of services, SAPTA requires subgrantees to meet conditions identified in the Request for Application (RFA) as “Base Funding Requirements/Restrictions.”
- State Liquor Tax: These funds are available to support all types of treatment for alcohol abuse. To ensure uniform provision of services, SAPTA requires subgrantees to meet conditions identified in the RFA as “Base Funding Requirements/Restrictions” although some requirements for civil protective custody services may be waived. Subgrantees must clearly address the priority populations and services identified below:
 - i. Funds must be used to provide services for alcohol abuse and for the detoxification and rehabilitation of abusers.
 - ii. Priority will be given to:
 - a) Areas of the state where there is a shortage of personnel to conduct treatment for alcoholism and alcohol abuse.
 - b) Needs of counties to provide civil protective custody pursuant to NRS 458.270.
- Methamphetamine Prevention Education and Public Awareness (Meth): The purpose of this funding is to provide prevention efforts at the community level statewide that are focused on reducing the incidence of methamphetamine use.
- State Prevention Infrastructure (SPI): The purpose of this funding is the implementation of evidence based direct service substance abuse prevention programs, practices, and strategies at the community level.

APPENDIX A16

Department of Health and Human Services (DHHS)
Division of Mental Health and Developmental Services (MHDS)
Substance Abuse Prevention and Treatment Agency (SAPTA)
Request to Serve as an Objective Reviewer Form

I respectfully request the opportunity to serve as an objective reviewer on the SAPTA Objective Review Panel for the following funding opportunities (check all that apply):

I am aware that this commitment will require the following: attendance at a two-day public meeting in the Carson City area, the reading and reviewing of up to 20 applications, and the reading and scoring of up to 10 applications.

Each reviewer is responsible for fully disclosing all current affiliations. Conflicts of interest must be declared by reviewers prior to discussion of any matter that would provide direct financial benefit for that reviewer, or otherwise have the appearance of a conflict of interest. When funding or other decisions are made regarding an organization with which the reviewer has an affiliation, the reviewer shall state his intention to abstain from making specific motions or casting a vote, before participating in related discussion. The Agency or a majority of the Review Panel may also declare a conflict of interest exists for a reviewer, and ask that the reviewer be removed from the voting process. Please list any of the following affiliations in the lines below: 1) Employers; 2) Boards or Commissions; 3) Organizations in which you or any member of your immediate family has a substantial or material interest and, to your knowledge, the Agency has a grant, contract or cooperative agreement with; 4) Any allegiance or financial interest you or any member of your immediate family has that might affect or appear to compete with your duties on the SAPTA Objective Review Panel (Attach additional sheets as needed).

1. _____
2. _____
3. _____
4. _____
5. _____

Name (please print)

Signature

Date

Contact Address, Phone Number, E-mail

Fax completed form to 775 684-4185, attention Office Manager or mail completed form to 4126 Technology Way, 2nd Floor, Carson City, NV 89706. Thank you.